

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000100024

Entity Name: BLUE SPIKE, INC.

**FILED**  
**Feb 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

16711 COLLINS AVENUE #2505  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

16711 COLLINS AVENUE #2505  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

FEI Number: 65-0798557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALVAREZ, VICTOR M  
WACHOVIA FINANCIAL CENTER  
200 SOUTH BISCAYNE BLVD., STE. 4750  
MIAMI, FL 331312352 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOSKOWITZ, SCOTT  
Address: 16711 COLLINS AVE #2505  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: V  
Name: MOSKOWITZ, GREGG  
Address: 50 MURRAY STREET, #701  
City-St-Zip: NEW YORK, NY 10007

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: /SCOTT MOSKOWITZ/

PD

02/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date